THE DINNEFORD'S
DICTIONARY FOR MOTHERS

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Presenting the latest information and best available advice and help concerning the health and happiness of Baby

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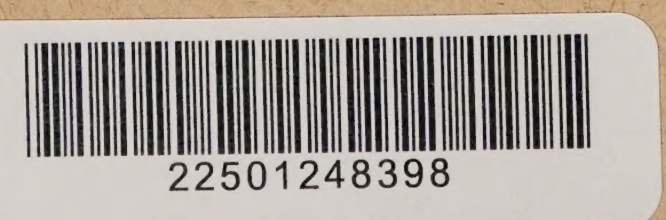

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ACIDOSIS

THIS is a digestive condition associated with loss of water and minerals from the body, either through intestinal disturbances, or infections. To treat it, therefore, baby must be given Lucozade, hourly, or water, flavoured with fruit juices, and sweetened with dextrose or glucose. This will make good the deficiency, and keep up the strength. A doctor should be consulted. See also *Biliousness* and *Indigestion.*

ADENOIDS

Adenoids are an overgrowth of the soft tissues found at the upper part of the throat into which the nose opens. A child suffering from adenoids will breathe through his mouth instead of through his nose because the adenoids impede the nasal passages. His mouth is constantly open and he wears a vacant look. There is a tendency to colds and chronic discharge from the nose. Sore throats and earache are also frequent. If you think that your child is suffering from adenoids, seek medical advice. If an operation for their removal is advised, have no fear. In skilled hands it is a perfectly safe operation, and in the great majority of cases, the results are very good indeed. Indeed in some the improvement is almost miraculous. A child who has had a poor appetite and been hard to please with his food will change completely. And a dull lethargic child will brighten out of all knowledge.

ANÆMIA

After any attack of fever, such as pneumonia or measles, there is often a period during which the child is anæmic ; weak, pale and easily tired. Or the condition may be due to a diet deficient in iron salts. But most cases of anæmia in childhood result in complete cure when the cause is removed. You will be well advised to keep the child in bed, with plenty of good food and fresh air. But see that he is kept warm. Then, as he picks up, let him have exercise. Fish liver oil combined with malt extract and iron is an excellent remedy. Iron taken in the syrup of phosphates of iron is usually well tolerated. But if a child does not respond quickly to simple treatment let a doctor see him as there may be some hidden cause for the condition which the doctor will discover.

APERIENTS

Constipation is a sign that all is not right with the diet and routine of the individual, and these must therefore be carefully adjusted to avoid future difficulty. Never make a habit of giving a child aperients as they tend to exhaust the bowel and are non-educative. Castor oil is particularly to be avoided. But remember that a child should have at least one motion a day. If he is having a little difficulty, give Dinneford's for a day or two.

APPENDICITIS

See *Colic* where a simple explanation is given as to how a mother may judge whether her child is suffering from a passing attack of indigestion or whether there is something seriously wrong which calls for the immediate care of a doctor. If mothers only kept it well in mind that most of the stomach and abdominal pains from which babies suffer are avoided by the frequent use of Dinneford's, they would be spared much anxiety. If a child is given Dinneford's regularly the all-too-frequent bouts of wind and colic are avoided and a motner is thus in a much better condition to tell whether or not there is something seriously wrong.

ASTHMA

Nearly one-third of the cases of asthma occur in childhood. It undoubtedly occurs in infancy, but, because the catarrhal symptoms are much more prominent than in grown-ups, it is mistaken for bronchitis or bronchial catarrh. The attacks take the form of bronchitis, but, unlike bronchitis, they disappear rapidly. Trivial causes bring these attacks on, such as cutting a new tooth, a touch of wind or colic and also constipation. Keep the child free from wind and colic and the bowels regular.

BACKWARD CHILDREN

A mother is wise to remember that with children the race isn't always to the swift—but to the sure. And if baby appears to be backward in developing she should remember that nature sometimes has a way of making haste very slowly—but surely. Ninety-nine cases out of a hundred of backward children are only temporary and many children may even benefit by what appears to be slow progress in learning to walk or to talk. If you have any real doubt as to the progress of your child ask the advice of a doctor, who will give you all the assistance and help you may need.

BARLEY WATER

To make this healthful and refreshing drink, take one tablespoonful of good pearl barley. Add a quart of cold water. Place the saucepan on your fire or gas stove and let it simmer gently for an hour or so until reduced to a pint. Then strain through a piece of clean muslin.

BATHING BABY

If you set about it the right way you cannot help enjoying baby's bath-time. And so will baby, too ! The bath can be a rubber one, or enamel, or just a household tub stood on a chair to keep baby out of draughts. Blood heat is the ideal temperature, tested with the tip of your elbow or, better still, with a thermometer. Have everything ready before you pick baby up for the bath : his basket containing safety pins, a soft brush, a soap dish with mild superfatted soap, his clothes airing in front of the fire, and the window closed. This is the only time you should have the window closed throughout the day—or night ! Pour in luke-warm water first so as not to make the bottom of the bath hot, or cold. Add warm water to required temperature. Bath baby in a corner out of the draught which is bound to enter if anyone should open the door. Sit yourself down in a low chair and wear a mackintosh apron with a flannel apron over it. Before you take baby on your lap, spread a large warm towel over your flannel apron. Undress baby, but keep him covered with a towel. With your soapy hands wash his head gently and rinse over the bath, supporting

his head with your other hand or forearm. Be thorough in the rinsing and very gentle in drying baby's head. Be careful in drying the folds and creases of the ears. Do not press them down. Wash the little body with your soapy hands, rubbing each limb towards the heart. Little soap is necessary. Do not miss anywhere. No scrubbing ! Then lift baby into the bath. Not too quickly. You don't want to frighten him. You want him to enjoy every minute of his bath. Place your left hand under his head so that his neck rests in a fork formed by your fingers. With your right hand pick up his ankles. Once he is in the bath gently splash water over his uncovered parts and before taking him out turn him over in the water, supporting his chest with your left hand and forearm. Then lift him out, grasping his ankles and lay him face downwards on the dry towel. Bring the ends of the towel over him so that he is not exposed. With a smaller soft towel dry his back and legs with a soft patting action. No rubbing ! Slip the damp bath towel from under him and turn him over on to your dry flannel apron. Then dry his front, being careful with the creases. Powder isn't really suitable as it cakes. A little lanoline in the creases is a help. For face cloths two or three pieces of butter muslin stitched together are ideal. Attend to his eyes separately, using little pieces of spotlessly clean cotton wool dabbed in warm clean boracic water. A little gentle abdominal massage ten minutes after bathing is useful in preventing constipation. With olive oil on your hand the massage should start from below, up the right side and down the left in an almost circular movement.

The best bath time for a tiny baby is just before his ten o'clock morning feed. Later on, when he begins to crawl, you can change his bath time to six in the evening—his tea-supper being not later than five o'clock.

BEDWETTING

Mothers should remember that a young sleeping child has little or no control over the muscular actions of the bladder for longer than a few hours. The pressure of water is not enough to wake him, so that he cannot be expected to call out for attention. Children who are perfectly good during the day in this matter, able to do without their napkins, may find it difficult to escape bedwetting for some time. Napkins do not help to cure this habit, for baby is inclined to regard them as having been put there for the purpose of wetting. Normal day control begins after the first twelve months and by the end of the second year it should be fully established. Control at night is usually achieved before the third birthday, but if you feel that the habit is becoming established rather than overcome, it is better to have a doctor's help in tracing the cause.

BILIOUSNESS

Biliousness is a common occurrence in childhood. It may be due to eating too rich food, under or over-ripe fruit, or other dietetic error ; or it may be associated with over-fatigue, undue excitement, eye-strain, worry and so on. Naturally the treatment must depend on the cause. The very best thing to do when a child suddenly loses appetite and is sick after a meal is to give a dose of Dinneford's Pure Fluid Magnesia. This corrects the acidity, settles the stomach and gently moves the bowels. After this give Lucozade or plenty of water with orange juice, glucose, or honey, and work slowly back to light, crisp diet. Often withholding food for 24 hours will be desirable. It is an excellent plan to give a hearty

healthy child a "diet day" with low fat and protein, but plenty of vegetables, salads and fruits, and a full dose of Dinneford's once every ten days.

BIRTH MARKS

These occur as bright red or purple patches on the skin, sometimes flat—but generally raised. They are also called strawberry marks and doctors call them nævi. Quite wrongly, they used to be attributed to some impression experienced by the mother during pregnancy. When they occur on the face and neck they will, in later life, be a serious handicap, and therefore every parent should take the advice of a doctor so that they can be properly treated and removed when the child is still young. By freezing or by the use of the electric current even large birth marks can be successfully dealt with so as to leave practically no trace. This treatment must, of course, be done by a fully qualified doctor. Skin specialists are particularly skilled in this work and, under modern conditions, the proper apparatus and the necessary skill may be found in most of the hospitals throughout the country.

BITES BY ANIMALS

Wash immediately with warm water and apply any good mild antiseptic. Cover with a small square of lint bound over with a clean piece of linen or with an ordinary bandage. All these articles are readily obtainable from the chemist. If the bite is severe, take the child to the doctor as soon as first aid has been rendered. It is never possible to tell whether or not an animal is suffering from rabies or is mad, in which case lockjaw may occur. If you have the slightest reason for thinking that the animal is mad, see a doctor at once. Fortunately, most dogs are quite healthy, and rabies, in this country, has been practically stamped out. But it can occur.

BLEEDING

Put your finger or thumb at once on the bleeding spot. Then replace your finger by a firm pad of antiseptic dressing or a clean rag. If the child is bleeding from a limb, lay him down and lift up the leg or arm. Remove garter. If serious—don't hesitate to send for a doctor. If the socket of a tooth is bleeding, after a tooth has been extracted, make a firm pad of clean handkerchief and get the child to bite on it. In case a child spits or vomits blood, lay him down with shoulders raised and give him fresh air. Send for the doctor, but don't forget to reassure your child.

BLEPHARITIS

Inflammation of the eyelids. There is a mild form in which there is little more than a crusting along the roots of the lashes, and this disappears on treatment. A lotion of carbonate of soda, 20 grains to the ounce of water, used warm, is useful for soaking the edges of the lids and then removing the crusts. When this has been done, diluted yellow ointment (a mecuric oxide ointment) may be rubbed into the edges of the lids. The earlier the treatment is started the better for the child. In the more severe form, which occurs sometimes after measles, there is actual ulceration. See your doctor.

BOILS

Boils may occur in crops over a small area or they may be scattered over the body. Sometimes a single boil only will appear, to be followed by another when the first is nearly better. Favourite places are the back of the neck, the buttocks and the backs of the thighs. A child subject to attacks of boils may be run down ; constipation is thought to be a common predisposing cause. Wash the skin thoroughly with soap and water and paint with iodine over the surrounding skin. If possible keep boils covered cleanly with a neat bandage, with a hole cut in the middle to allow any discharge to pass. Show them to the nurse at the clinic, who will advise you what to put on them. But remember that a teaspoonful or so of Dinneford's before meals will help to keep a child's stomach settled and his blood pure. This will help to remove the underlying cause of boils cropping up through weakness or constipation.

BREAST FEEDING

Every year thousands of mothers fail to give their babies the best food in the world : milk from the breast. They may be over-anxious, living under nervous strain, suffering from a faulty diet. In some mothers the milk does not receive proper stimulation. *A mother who worries about her milk is doing the very thing to curtail the supply.* A calm, happy outlook is essential for a good flow of milk. Remember that there are good extra foods available for baby if your breasts should not be able to supply quite enough. The local Child Welfare Clinic will show you how to give baby a test meal—to decide whether you are under-feeding or not. The more vigorously an infant sucks the better the stimulation for the flow of milk. In the absence of vigorous sucking sponging the breasts with hot and cold water, always finishing with cold, provides extra stimulation. Extra liquid, particularly water, helps to increase the quantity of milk. You should sit down and take the water in slow sips ; rest being as beneficial as the water. By attention to your diet you will improve the quality of the milk. Fruit, dairy foods, salads are important for the mother who is breast-feeding her child.

In the new-born infant, whether girl or boy, it is sometimes found that the breasts become swollen and inflamed. This is quite natural and any attempt to interfere may cause great injury. If they become very inflamed the doctor should be told. Avoid all pressure on the breasts when handling baby, but cover with lint and lightly bandage if swollen.

BREASTS—see *Breast Feeding.*

BREATHING

The wise mother will have a peep at baby when he is asleep to make sure that the lower jaw has not dropped. By gently propping this up and bringing the little lips together a baby can generally be trained to breathe properly right from the start. Mouth breathing is dangerous because this is the way in which dry, dusty, germ-laden air is breathed into the lungs. The nose is a natural filter.

BRONCHITIS

A child suffering from bronchitis should be treated with very great care. Mother should remember that this trouble may follow nasal catarrh or sore throat and that no child should be allowed to go about as if all were normal whilst he has either of these two complaints. Bronchitis may do damage to

his little lungs and other organs too. The best way to keep your child clear of any lung disease is to see that his food contains plenty of the protective foods such as green vegetables, butter and fruit. Do not *over*clothe. On the other hand, when a cold wind is blowing, see that there is sufficient warm clothing. Most mothers can be trusted to err on the side of over rather than under clothing. If, in spite of your precautions, bronchitis does set in, send for the doctor. He will tell you what to do, both to stop the hurtful coughing and to resist the weakening effects of the disease on the constitution generally.

BRUISES

A firm, cold application frequently renewed is best. Afterwards, when the bruise has settled down, probably twenty-four hours later, bathing with warm water will hasten the removal of the unpleasant colour.

BURNS AND SCALDS

Where there is a fire, it is important to have a fireguard, just as you would have a small gate at the top of the stairs. Actually, a fireguard where there are small children left alone to play is a legal obligation. Avoid flannelette for clothes, celluloid for toys. They are highly inflammable. There will come a time, too, when a child wants to strike a match; and eventually when he WILL. See that he knows how to strike properly and how to blow it out. The novelty will quickly wane. Show him how a match can hurt if not used carefully.

As for scalds, what would be a trivial accident on your skin may prove very serious indeed to a small child. Keep all hot liquids out of reach. When passing cups of tea avoid passing over or within reach of outstretched arms.

ACT AT ONCE when an accident occurs, but very calmly and quietly. Wrap up the little man and soothe him. Exclude air from the burn or scald by dipping it into warm water to which you have added bicarbonate of soda. Then get some lint and spread the smooth side with boracic ointment, which will soothe and help to heal. In the absence of boracic ointment use some old linen dipped in strong tea or a compress of used tea leaves. Do not prick blisters. Change the dressings frequently. They must not be allowed to dry. If you are wise you will put the child to bed for a day or two and keep a covered hot-water bottle at his feet. The nerves are bound to have sustained a minor shock.

BUTTOCKS

A baby's skin is very delicate and even quite gentle rubbing with a moderately rough towel may make baby sore. It is better to dry baby with pats. Of course you must change napkins immediately they become soiled or you are bound to have trouble. (See notes under *Napkin Rash*.) When a napkin is changed, clean and dry the buttocks carefully, dusting afterwards with talcum powder. Never use soda in washing napkins. Get a good baby soap. Sore buttocks are often associated with digestive upsets and these must, of course, be treated.

CATARRH

Tiny infants sometimes have catarrh without this being suspected. Such infants keep their lips slightly apart and are able to breathe quietly. For this reason the trouble may pass unnoticed for some time. But what is often observed is that baby does not suckle steadily at the breast sometimes

dropping it altogether, crying a little or fighting against it. In all such cases care should be taken to make sure there is no obstruction in the nose. The mouth-breather naturally finds it hard to have his mouth fully occupied with sucking. To prevent catarrh developing, avoid too much sugar in the diet, give vitamin foods early, and guard against reinfection by using as many clean pillow slips as is practicable and having plenty of soft little rags for the nose—to use only once and then burn. Be sure baby has fresh moving air to breathe.

CHICKEN-POX—see *Infectious Diseases, and Rashes.*

CHILLS

Chills are due to an excessive cooling of a part or the whole of the body surface. If your child catches a chill put him to bed and *keep him there for at least 24 hours after the temperature has become normal.* Liquid diet is best. Keep hands and feet warm, using hot-water bottles if necessary. Give a regular teaspoonful or so of Dinneford's Magnesia to ensure a healthy bowel movement.

CHOKING

Pass your finger or the handle of a small spoon along the inside of the child's cheek to the back of his throat and then hook the foreign body forward. In less difficult cases get the child to cough or smack him sharply between the shoulders, while bending head and shoulders forward. If the child is young he may be held up by the feet and slapped on the back. If you are not quickly successful in removing the obstruction, let a doctor see to it.

CHOREA—see *St. Vitus' Dance.*

CIRCUMCISION

In a very young baby the foreskin is apt to be narrow or adherent, so that it cannot be drawn back to expose the part underneath. This will generally right itself in a few weeks. If it does not—circumcision may be necessary. But the doctor at the Baby Clinic or your own doctor will advise you about this if you tell him.

COLDS

Keep your child away from people who already have colds ! Let him breathe plenty of fresh air. If you have a garden let the garden be his day nursery—but to use the garden in all weathers you will need some sort of out-door shelter. See that your child's blood is pure ! Beware of constipation, breath which isn't sweet in the mornings, tongue just slightly coated ; for these things mean that he is more likely to catch cold. Simple foods, slowly eaten, without excitement, help to lessen the chance of colds and catarrh. Do not let a child sleep with the blanket across his face ! It is important to realise, too, that every baby needs *his own handkerchief.* Just *anyone's* hanky is *not good enough for baby.* It exposes the child to unnecessary risk. Safety-pin a small clean square of the softest material to baby's clothes when dressing him. Although there is no infallible cure for colds, there is much in the way of good sense that you can do to hasten recovery and limit the severity of the cold.

COLIC

When baby draws up his legs and screams as though in a rage soon after feeding, this is undoubtedly colic, which may be due to flatulence. Give him a teaspoonful or so of Dinneford's Magnesia. This will let up the wind and bring comfort quickly. Perhaps you are over-feeding baby. If colic occurs frequently, and particularly if there is diarrhœa as well, consult a doctor.

CONCUSSION

Even a light blow on the head may cause temporary concussion. . . . that is, a condition of lowered vitality. Generally there is a fairly quick recovery. Keep baby in a darkened room, completely resting until all symptoms have passed off. Blankets and hot-water bottles to maintain body warmth. If headache and fatigue persist then the condition is more serious. You need expert advice.

CONSTIPATION

The one thing to remember is that chronic constipation in babies is far more likely to be caused than cured by dosing with purges and laxatives. Get your baby into good habits without the aid of medicines, bearing in mind that sensible feeding, plenty of kicking exercise, gentle abdominal massage night and morning are infinitely better than faith in powders, castor oil or patent laxatives. If necessary, give a teaspoonful or so of Dinneford's Fluid Magnesia at the beginning of each feed and hold baby out first thing in the morning and after the evening feed. You should then have no cause for worry. So long as the motion is soft it is not important whether baby goes once or twice a day. Let nothing interfere with what should be baby's most important engagements ! Do not distract baby's attention from the business in hand. If the motions are hard and bullet-like, then baby really is constipated. In this case you may be under-feeding him or he may be needing extra drinks of water between each feed. Baby's weight record should tell you whether you are under-feeding. If you are still doubtful what course to take get your doctor's help as soon as possible.

CONVULSIONS

These are nearly always due to a digestive upset and children who are properly fed rarely suffer from them. Immediately before an attack there may be indigestion, colic, or a bad bout of teething. The symptoms of convulsions are squinting, rolling of the eyeballs, twitching of the fingers, jerking the thumbs into the palms, stiffening the neck, throwing back the head, jerking the limbs. When these symptoms occur be on your guard to prevent a fit. Apply comfortably hot fomentations to the stomach, but be very careful not to burn. A warm bath is often soothing and efficacious. While in the bath cold water should be squeezed on the head. Let him stay in from five to ten minutes. Then wrap him in a warm, thick towel, dry rapidly, slip on a warm flannel nightgown and tuck him cosily in his cot without a moment's delay, or the good of the bath will be undone. Give the child a warm enema. Make this with a teaspoonful of salt and a pint of warm water—not hot.

CROUP

When the spasm of coughing occurs, loosen the clothing and give a teaspoonful of ipecacuanha wine. This will probably cause vomiting and stop the attack of croup. Then give the child a little warm syrup for comfort,

or a teaspoonful of Dinneford's Pure Fluid Magnesia. A mild laxative, as soon as possible after an attack, helps to prevent another attack. Generally speaking, nervous children are most likely to be subject to attacks of this kind of coughing. Give plenty of rest in bed ; plenty of open-air exercise ; and, as far as possible, avoid great excitement. Don't overload a child's stomach at the evening meal, or at any time for that matter.

CRYING

If baby cries, find out whether there is any reason for it other than a wish to make you pick him up and nurse him. Go over the following :—

Is he wet or soiled ?

Is a pin sticking into him ?

Is his skin chafed or are his buttocks sore ?

Is he comfortable or is his clothing or bedding ruckled ?

Is he too hot or too cold ?

Having run over these points and put right everything you find, if he still cries, then it may be because he is teething. He may need a little sip of water, but if he cries still, then the trouble is most probably due to wind or colic. And remember that most of baby's cries are due to wind or colic. Both cause agonised screaming, the little face being contorted with pain, legs drawn up and clenched fists thrust alternatively into the mouth and abdomen. Soothe the child, turn him over on his " tummy " and gently pat his back. You can spare a child much suffering by always keeping his stomach sweet with the regular dose of Dinneford's and it keeps his bowels open, too.

CUTS

Every cut, however small, should be painted immediately and thoroughly with any good mild antiseptic. So keep a small bottle in your cupboard. If the cut is large cover with one of the modern self-adhesive antiseptic first-aid dressings which you can buy from any chemist. These are neat, clean and safe ; a child cannot easily remove them whilst playing.

DARK, FEAR OF THE

One of childhood's worst fears is loneliness. For a child to feel neglected, for him to be deprived of the confidence that mother is somewhat nearby—this is sufficient to cause terror in a small child. And when, to loneliness, is added the dark night, a child is easily liable to feel acute terror. In order to avoid this as far as possible mother should, without pandering to a child, always try to give him the feeling that he is not alone, forgotten, neglected —but that someone is always near, if needs be. Mother will find it helpful if she remembers to *listen* to what the child says about its fears and imaginings and *not to dismiss them lightly as of no account.* A mother should let her child see that she is helping to find a reasonable cause of explanation for such fears, thus assisting the child to form the habit of looking for a reasonable explanation when mysterious noises, sounds or shapes disturb the night. If mother can share a child's fears and then help to disperse them in the way described, she will be saving her youngster from the unreasonable fears and terrors, which in so many cases persist into adult life.

DIARRHŒA

A breast-fed baby may occasionally have a green stool which need cause you no alarm. But it should put you on your guard. If repeated, give an extra teaspoonful of Dinneford's Magnesia. Baby may have caught a slight chill. Keep him warm. See that his nappies are dry and warm when put on. Don't let him lie about so as to get chilled. If the diarrhœa is more serious, if the stools are loose, watery, green, or black, you had better call a doctor. In this case baby will look unwell, and his appearance alone should be sufficient to make you get the doctor in to see him.

DIPHTHERIA

A child may become ill 24 hours after contact with the germs of diphtheria, or at any time up to 7 days. He will be out of sorts, and may, *or may not*, feel feverish. Difficulty in swallowing. Tenderness at sides of neck. In mild cases there may simply be redness at the back of the throat, the symptoms may be exceedingly mild, attracting little attention, passing off in a day or two. But if the attack is even ordinarily severe, there will be an increasing difficulty in swallowing. The breath will be unpleasant. The red patches at the back of the throat will turn yellowish-white and may spread down the throat and up towards the nose. If you have the least suspicion that your child has caught diphtheria SEND FOR THE DOCTOR. It is important to ACT AT ONCE. Then you are absolutely sure of a cure. The essential treatment is the giving of the antitoxin as early as possible, and it is a mother's responsibility to see that the case is brought quickly under treatment. The case will be removed to an Isolation Hospital and the Local Authorities will disinfect all property where there has been contact.

DISINFECTING

When baby has passed through an infectious illness and is allowed out, care must be taken to disinfect thoroughly everything he touched (and himself !) before the bedroom can be used by anyone else or before he mixes with other members of the family. Send his mattress to be disinfected. Boil for half an hour washable bedclothes. Burn books and toys. The public health authority will disinfect the room for you. But afterwards it should be scrubbed with soap and water and a disinfectant. Then leave the door and windows open for some hours before it is used again. In some illnesses it will be necessary to scrape the walls and re-paper them. Don't forget that the outdoor clothing which the child was wearing when he was taken ill should have been disinfected and cleaned long before this. Now for the small patient himself ! Wash his head. Give him a good bath. Put on clean clothes. Let him sleep in a different room during convalescence —to make a pleasant change. However many baths he may have had whilst ill, this final bath is an important precaution.

DISLOCATIONS

This is the displacement of a bone from its natural position at a joint. Make no attempt to put the joint into normal position unless you are fully qualified to do so. Let a doctor do it.

EARACHE

Earache causes prolonged crying. The child rolls his head about, pressing one side into the pillow or catching at his ear with his hand. Or he may even hit his head with his hand, although this last symptom is occasionally caused by teething. Earache or any discharge from the ear must never be regarded lightly or neglected as it is likely to lead to serious trouble. A doctor should be called in as soon as possible. On no account rub baby's head or neck. As a temporary relief measure until the doctor arrives hot, dry flannels may be applied. In older children earache may be an indication of mumps. A very convenient hot, dry flannel poultice may be made by taking a piece of flannel (part of a clean discarded flannel garment does admirably), roughly making it into a bag and filling it with common salt which has been warmed in the oven. This simple measure is often extremely effective. See *Mastoid.*

ECZEMA

Most authorities are agreed that eczema in babies has a dietetic origin, and it is a fact that a change of food will often bring about a rapid cure. Most cases clear up completely when the child is old enough to be put on a solid diet. Eczema generally starts in the folds of the skin or on the head—just an unusual roughness or redness.The surface then becomes fissured and watery and scabs begin to form, the raw red surface between continuing to weep.

The affected parts irritate—but if they are rubbed in any way they will not heal, so your main treatment must be to prevent any irritation. You should get a doctor's advice ; but here is a simple outline of the treatment to follow : never wash with soap and water, but cleanse by means of medicated paraffin and gentle dabbing—no rubbing. Remove any possible source of irritation. Coax off any scabs or crusts after several hours soaking in paraffin oil. It is quite useless to put ointment over the scabs, but after they have been removed you should protect the area with some simple ointment. To prevent scratching wrap baby's hands in soft rags. Once a week baby may have a soft-water bath, but no soap should be used.

ELECTRIC SHOCK

Be sure to turn off current at the main. In case you have to remove a child from danger, put on rubber gloves, or wrap hands in mackintosh and stand on a pile of dry clothing or piece of wood before touching him.

EMETICS

In certain cases of poisoning an emetic is necessary to promote vomiting. The handiest emetics are a teaspoonful of mustard or one tablespoonful of common salt or powdered alum, in a half tumblerful of warm water. Ipecacuanha wine, of which the emetic dose is half an ounce, is usually too slow. Often a doctor will wash out the stomach by means of a stomach tube. When vomiting begins it should be encouraged by giving large draughts of tepid water. In some cases of poisoning an emetic *should on no account be given.* See *Poisoning.*

EYELIDS, INFLAMMATION OF THE—see *Blepharitis.*

EYES

Your baby's eyes are so precious and vital that the more you know about their care the more you will be able to contribute to baby's happiness, both

now and in later life. The more time baby spends looking at green fields and the sky and the less time he spends looking at bricks and mortar, shop windows and moving traffic, the better for his eyes. Don't let him begin lessons too early, and when he does begin let them be short and let the print be large. To use the eyes sensibly is excellent exercise for them. Normal light is better than the exaggerated care of a mother who will, for instance, prefer to keep her baby in a darkened room " to save his eyes." A useful hint is to remember not to stare at baby. They love to imitate and will stare back, thus depriving the eyes of those very essential rest periods provided by blinking. A good plan when you are telling a child a story is to get him to close his eyes when you come to the exciting parts, because any strong interest is liable to arrest natural blinking for the time being. If a child is engaged in any task in which he has to widen his eyes, pucker his brows to see properly—*then changes should be made at once.* Never let a child sleep so that when he wakes he will be facing the sun. Styes on the eyelid show that the blood is out of order or baby is run down, perhaps through lack of vitamins in the diet. But styes may also point to eye-strain. If they do not go away after bathing with warm boracic lotion and general care, get advice.

FEAR OF THE DARK—see *Dark, Fear of the.*

FEVERS

In any sort of fever, where there is a high temperature, all food should be withheld, even of a fluid character. Lucozade or bland fruit and vegetable juices, well diluted, can be allowed, if unflavoured water palls ; and, as the temperature falls, vegetable broths may be included. The big thing is REST in a quiet, semi-darkened room ; plenty of fresh air, plenty of drinks of water, and a daily or twice daily sponge with luke-warm water, using a warm, dry towel. Don't expose the body too much when doing this ; one limb at a time. A simple alkaline mouth-wash is helpful. Discharge from the nose or throat should be taken away in a handkerchief and destroyed. Soft paper hankies are best. The doctor will probably ask you to take the child's temperature at intervals and to keep it noted on a chart. See *Temperature.*

FIRST AID OUTFIT

Boracic Lint, ½ yard.
Oiled Silk, ½ yard.
Absorbent Cotton Wool, ¼ lb.
2 Triangular Bandages.
2 Three-inch Roller Bandages.
Small packet of sterilised Gauze.
Finger Bandage.
Clean Scissors.
A set of small elastic, adhesive bandages, such as Germoplast.
Tincture of Iodine, 1 oz.
Boracic Acid Crystals, 1 oz.
Vaseline, or Germolene, small tin.
Friar's Balsam.
Permanganate of Potash Crystals.
Castor Oil, 1 oz.
Tin of Mustard.
Eye Bath.
Eye Shade.
Higginson's Enema Syringe.
Clinical Thermometer.
Safety-Pins.

FITS—see *Convulsions.*

FLATULENCE—see *Wind.*

FOREIGN BODIES—see *Obstructions.*

GASTRO-ENTERITIS—see *Summer Diarrhœa.*

GERMAN MEASLES—see *Infectious Diseases,* and *Rashes.*

GLANDS

The lymphatic glands of the body help to protect children from illness. The glands in the neck, in the arm-pits, in the groin and bends of the elbow and knee are active scavengers, helping to keep poisons out of the blood-streams. In some illnesses, or when the child is run down, one or more of these glands may swell very considerably. Swollen neck glands are very frequently seen. Later in life, when general bodily resistance is improved, these glands cease to work so hard, just as the tonsils diminish when school-days are over. If your child is troubled with swollen glands, remember that sunshine, fresh air, cod liver oil and malt are proving much better treatment than the old-fashioned operation. Tonsils, however, are a different matter. See *Tonsils*.

GRIPING PAINS—see *Wind* and *Colic*.

JAN.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
OCT.	8	9	10	11	12	13	14	15	16	17	18	19	20	21	2
FEB.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
NOV.	8	9	10	11	12	13	14	15	16	17	18	19	20	21	2
MAR.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
DEC.	6	7	8	9	10	11	12	13	14	15	16	17	18	19	2
APR.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
JAN.	6	7	8	9	10	11	12	13	14	15	16	17	18	19	2
MAY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
FEB.	5	6	7	8	9	10	11	12	13	14	15	16	17	18	1
JUNE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
MAR.	8	9	10	11	12	13	14	15	16	17	18	19	20	21	2
JULY	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
APR.	7	8	9	10	11	12	13	14	15	16	17	18	19	20	2
AUG.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
MAY	8	9	10	11	12	13	14	15	16	17	18	19	20	21	2
SEPT.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
JUNE	8	9	10	11	12	13	14	15	16	17	18	19	20	21	2
OCT.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
JULY	8	9	10	11	12	13	14	15	16	17	18	19	20	21	2
NOV.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
AUG.	8	9	10	11	12	13	14	15	16	17	18	19	20	21	2
DEC.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	1
SEPT.	7	8	9	10	11	12	13	14	15	16	17	18	19	20	2

CONFINEMENT

Here is a table which shows as near beginning of the last period and com

GROWING PAINS

The process of growing should not be painful, and any pain is a danger signal. The minor aches and pains often so labelled are essentially rheumatic in origin, and a doctor should see your child if they persist. The old-fashioned idea is to treat these pains with a smile—as though they will quickly pass away. But to-day it is realised that careful attention when they occur may be the means of avoiding serious and chronic rheumatism afterwards.

GUMS—PAIN IN TEETHING

During teething baby's gums easily give trouble. Pain in the teeth makes the child rub his gums and cry out when they come into contact with anything hard, and sometimes when they even touch the rubber teat of the bottle. He may, on this account, refuse his feed for several days. The pain is spasmodic. Baby may be playing happily and then suddenly cry out.

7	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
4	25	26	27	28	29	30	31	1	2	3	4	5	6	7	NOV.
7	18	19	20	21	22	23	24	25	26	27	28				
4	25	26	27	28	29	30	1	2	3	4	5				DEC.
7	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
2	23	24	25	26	27	28	29	30	31	1	2	3	4	5	JAN.
7	18	19	20	21	22	23	24	25	26	27	28	29	30		
2	23	24	25	26	27	28	29	30	31	1	2	3	4		FEB.
7	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
1	22	23	24	25	26	27	28	1	2	3	4	5	6	7	MAR.
7	18	19	20	21	22	23	24	25	26	27	28	29	30		
4	25	26	27	28	29	30	31	1	2	3	4	5	6		APR.
7	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
3	24	25	26	27	28	29	30	1	2	3	4	5	6	7	MAY
7	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
4	25	26	27	28	29	30	31	1	2	3	4	5	6	7	JUNE
7	18	19	20	21	22	23	24	25	26	27	28	29	30		
4	25	26	27	28	29	30	1	2	3	4	5	6	7		JULY
7	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
4	25	26	27	28	29	30	31	1	2	3	4	5	6	7	AUG.
7	18	19	20	21	22	23	24	25	26	27	28	29	30		
4	25	26	27	28	29	30	31	1	2	3	4	5	6		SEPT.
7	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
3	24	25	26	27	28	29	30	1	2	3	4	5	6	7	OCT.

e the probable date of your baby's birth. Find the date of the the date immediately below it. This should be baby's birthday.

To ease the tender gums give frequent sips of cool boiled water. This in addition relieves thirst, which is often present owing to the small feeds taken. It is soothing to apply borax and glycerine to the gums.

HAIR

If your baby's hair doesn't happen to be curly don't resort to rags or curlers to try and force unnatural curls. Leave it quite free at night. Systematic and careful brushing will do a great deal to promote hair growth, and brushing in the morning is of far greater value than brushing at night when the child is tired. Providing you wash a three-year-old toddler's hair once a week or so with good soap and always use a brush which is kept clean, his hair will look glossy and attractive, curly or straight.

HEADACHE

This may be due to constipation or lack of fresh air. The remedies are obvious. But remember that a child's headache *may* be due to eye-trouble, in which case you should let an oculist see him.

HEAD INJURIES—see *Concussion.*

HEAT STROKE—see *Sunstroke.*

HEIGHT

After three months babies are generally taller by an inch at least. At six months they are usually three inches taller, at nine months, six inches. After one year baby may have put on as much as nine inches.

HICCOUGH

This tiresome affliction is common to most infants at some time or another. It is usually caused by too slow feeds, or by cold food, or by under-feeding (in the case of a breast-fed baby), or by too frequent feeding. You will find that hiccoughing can be relieved without very much trouble. A rapid change of position will sometimes do it. Or gently rubbing baby's back to help him pass wind. Or by giving him a teaspoonful of Dinneford's, warmed, to sip.

INDIGESTION

Tiredness, nervousness, distaste for a particular food are responsible for much indigestion. A child may go to sleep all right and be wakened in the night by indigestion. If a baby is fed peacefully, if mother herself is quiet and attentive to baby whilst feeding is in progress, she will do a great deal to ensure perfect digestion. Naturally over-feeding is liable to cause indigestion, also too highly concentrated food. But remember that a teaspoonful of Dinneford's Pure Fluid Magnesia will nearly always settle the little stomach and baby will fall off to sleep again. See *Breasts.*

INFANTILE DIARRHŒA

A disease of the later summer months, especially virulent in children under two years old, most severely attacking those between three and six months. Bottle-fed babies are more prone than breast-fed. The disease begins with fever, diarrhœa, probably vomiting. Its progress may be very rapid . . . and the attack can be very, very severe. *Prevention is the thing to aim at.* Clean food. Fewer flies. Boiled milk for the bottle. Clean bottles.

If, in spite of all your wise precautions, an attack should occur, your doctor will give you full instructions as to what is best for baby. In any case you must stop all milk for 24 hours and baby must be put on a diet of plain, boiled water, given freely. Teaspoonfuls of Lucozade or glucose in water repeated every few hours are useful in maintaining strength.

TABLE OF INFECTIOUS DISEASES

Illness.	*Incubation Period.*	*Duration of Infection.*	*Symptoms.*
Chicken-pox	11-21 days	Until all scabs have fallen off	Raised red spots, then water blisters and scabs.
Diphtheria	2-10 days	4 weeks at least	Sore throat, difficulty in swallowing.
Measles	10-14 days	Not less than two weeks from appearance of rash	Running eyes and nose: fine red rash.
German Measles	7-21 days	Not less than 10 days from appearance of rash	Bright red rash more rose coloured than scarlet fever.
Mumps	10-24 days	Not less than 3 weeks	Swelling below the ears and in the jaws.
Scarlet Fever	1-8 days	6-8 weeks	Sore throat and scarlet rash on pink ground.
Whooping Cough	7-14 days	5 weeks from the whooping	Catarrh and small cough leading to bouts of coughing which end in a whoop.

INFLAMMATION—see *Skin Eruptions.*

INFLUENZA

Even mild attacks of influenza place a great strain on a child, and that means serious risk of complication. So it is best to let a doctor see the patient. When the 'flu resembles a bad cold a hot bath and then warm bed is the treatment. Keep the room airy. Keep other folk out. If there is much of a temperature the bedclothes must be light. Sponge the patient down twice a day. Give a mild mouth-wash night and morning. Give plenty of liquids : Lucozade, water, lemonade, orange juice in water. When

the fever lessens, give milk and milk foods, well-cooked vegetables, eggs and white fish, and frequent doses of Lucozade. After the temperature is right down, another 48 hours in bed will find the patient well enough to sit up. Infectiousness disappears 3 or 4 days after the fever has gone. If the attack is very severe, it is better to get a trained nurse into the house, if possible. A bad case can turn to pneumonia. In some cases of 'flu there is sickness, pain in the abdomen, and slight diarrhœa. Hiccough is sometimes very troublesome. The 'flu patient *must* take it easy for some days afterwards.

ITCHING

This is relieved by sponging with hot water, as hot as can be borne. Afterwards apply talcum powder.

MARASMUS

A condition of backwardness and underweight due to improper or insufficient feeding.

MASTOID

Infection of the middle ear is common in children and this may give rise to mastoid trouble. Among the most important symptoms of mastoid disease are pain and tenderness behind the ear, headache, giddiness, sometimes vomiting, and a general feeling of being out of sorts. There is an irregular, high temperature, especially at night. Nearly always there is some discharge from the ear. In most cases there is partial deafness and " noises in the head." Of course, if a mother suspects mastoid trouble she should ask the doctor to call right away. The best precaution is to take early advice. Don't wait—even if it is " only slight earache."

MEASLES—see *Infectious Illnesses* and *Rashes.*

MOTIONS

Baby's motions will tell you a great deal after the first few days. For perfection they should settle down into two a day, of a good yellow colour, and smooth substance, something like made mustard. If they are over-frequent, scanty, or show signs of indigestion, you should do something about it. These signs do not always mean over-feeding. There may be something wrong with *your* diet. You may be eating too quickly. With the under-fed baby there are scanty motions and often these are of a brownish colour, though in some cases they are green. They may be very infrequent, especially if baby is assimilating all he is being given. But when baby has more than three motions a day you can usually take it for granted that he is being over-fed.

MUMPS

Epidemics of mumps are not uncommon, especially in schools. Mumps is most likely in winter and spring, attacking children between the ages of 5 and 15. Boys appear more liable to it than girls. There is generally a slight temperature, some pain below the ear on one side and a swelling, which gradually enlarges, raising the lobe of the ear. The disease is

probably contagious for about 24 hours before the swelling of the neck glands and for about a week after the swelling has subsided. There may be some difficulty in chewing and swallowing as the swelling prevents the patient opening his mouth properly. But real pain is frequently absent altogether. There is no special treatment for mumps—Give a regular teaspoonful or so of Dinneford's to keep the bowels in order. Liquid foods only while there is any temperature, and the use of a straw is helpful when the jaws are painful. See *Infectious Illnesses.*

NÆVUS OR NÆVI—see *Birth Marks.*

NETTLE RASH—see *Rashes.*

NIPPLES

It is important to protect and cleanse the nipples and the breasts generally. Before feeding baby the mother should squeeze out a drop or two of milk and cleanse the nipples with boiled water and a swab of cotton wool. After nursing, the nipples should be again cleansed, dried thoroughly and covered with a clean cloth to prevent them cracking. If the nipples should become cracked treat them each day with a little Friar's Balsam after each feed. Care for your nipples during pregnancy and you will do much to prevent this trouble afterwards. If your nipples are depressed and not too easy for baby to suck roll them quite gently between your finger and thumb, aided by a little olive oil, drawing them out as you do so.

NOSE BLEEDING

Sit the child upright and put cold water pads against the nape of the neck and the bridge of the nose. If the bleeding should continue immerse the feet in water as hot as can be borne. When the bleeding stops let the blood have time to clot before allowing the child to blow his nose. If your efforts fail to stop the bleeding send for a doctor.

NURSERY REMEDIES

Tannic Acid Jelly	for burns and scalds. You should never be without a small tube of this.
Olive Oil	for baby's skin and mother's nipples.
Vaseline or Germoline	for use where a protective ointment is needed.
Lanoline or Hazeline	to prevent chafing, for greasing the creases after the bath.
Iodine	to paint on unbroken skin injuries to prevent infection.
Boracic Crystals	when mixed with warm water provides a mild antiseptic, for bathing eyes and as a mouth-wash.
Calamine Lotion.	Soothing application when baby has an irritating rash.

Talcum Powder or Germolene Baby powder for the skin.

Dinneford's Pure Fluid Magnesia. The best form of magnesia for baby and also for mother. A teaspoonful or so before baby's feed aids digestion, brings up the wind, helps to purify the blood and keep the bowels naturally active.

Cod Liver Oil, Halibut Liver Oil, or suitable alternatives. Its beneficial action, in preventing rickets and promoting growth is due to its rich content of Vitamins A and D.

Glycerine and Thymol. An excellent mouth-wash.

Castor Oil. A mild, non-irritating and quickly acting purgative.

NOT to be given in acutely painful conditions of the abdomen without medical advice. Never use for constipation.

Camphorated Oil. Warmed, makes a useful chest rub. Mix with olive oil for tender skins.

Ipecacuanha. An emetic.

Under **FIRST AID OUTFIT** we give a list of contents of a nursery First Aid Box.

OBSTETRIC TABLE—see Confinement (see pages 16 & 17).

OBSTRUCTIONS

Foreign Body in the Eye. Wash freely with warm water. If the obstruction is under the upper lid, get the child to look downwards while you place a match-stick on the eye-lid under the eyebrow. Press slightly inwards and draw the lid upwards by taking hold of the eyelashes. Then you can remove the foreign body with the corner of a clean handkerchief. It is better to stand behind the patient's head to do this. To remove anything from under the lower lid, draw the lid down. But if you can see that there is something embedded in the eye-ball itself, drop in some castor oil, cover with a hanky and get a doctor.

Foreign Body in the Nose. If a child has pushed a cherrystone, a button or a pebble into his nostril, you can generally get these out by external pressure from above downwards. Do not attempt to extract with any instrument. Another method is to make him sneeze with a pinch of snuff. Never use an instrument up the nose.

Foreign Body in the Ear. Never use an instrument in the ear. If there is an insect, or other small obstruction, in the ear, put in a little warm olive oil; then tell the child to bend his head over. But if you have the slightest difficulty get the doctor. Ears are far too easily damaged.

ORANGE JUICE

A sufficiency of vitamin C is essentual for perfect health and development, and with the bottle-fed baby this must be commenced as an extra ration from the 6th or 8th week. With the breast-fed baby it can be started at the 6th month. Orange juice is the richest known source of vitamin C, so this is generally used, beginning with a few drops diluted in water, increasing to 6 teaspoonfuls of juice in the same quantity of water at a year old.

PNEUMONIA

Exposure to cold, or wet, or chilling, especially after a previous illness, such as measles, bronchitis, or influenza, are the main causes of pneumonia. Except for the case of bronchial pneumonia, this illness is best nursed where there is plenty of open air, or even out-of-doors on a balcony. The patient must be kept warm without any weight of clothing, and a light gamgee tissue jacket is usually advised. Over-feeding in all its forms must be avoided, also any strain on the heart, by very careful nursing, keeping the patient flat. Prolonged convalescence is necessary.

POISONING

Poisoning should be suspected when a child who has been apparently quite well becomes ill just after taking some food or drink, or within an hour or two after. You must send for a doctor at once. But here are a few useful " First Aid " points : If there are stains on the mouth or lips, give *no emetic.* An emetic is liable to damage the stomach when an acid poison has been swallowed. Give water freely, also white of egg, gruel, milk, thin arrowroot or cornflour. If there are no stains on the mouth or lips, give an emetic. A teaspoonful of mustard or a tablespoonful of common salt in half a glass of water. You can assist the emetic by putting your fingers or a feather down the child's throat. Save all vomited matter for the doctor's inspection. If the child is unconscious, shake him, flick him with a wet towel to arouse him—but do not hold smelling salts under his nose. The doctor *must* see the child before he is allowed to go to sleep.

PRICKLY HEAT

This is a very common skin condition in infants and young children, particularly during the summer. Clothing which is too warm and unsuited to the season is a contributory cause and if it is lightened sweating is lessened and the prickly heat is eased. But it is also useful to cool the blood and a dose of Dinneford's Pure Fluid Magnesia is well recognised as the most effective means of doing this. It should be given at the outset and given freely until the rash subsides, which it should do very quickly. See *Rashes.*

RASHES

Mothers find it very helpful to be able to recognise the nature of a rash when it appears. We therefore give simple descriptions of common rashes, infectious and non-infectious.

Measles. Raised, dusky red spots, blotchy in outline. They generally appear first round the ears and round the roots of the hair. They then spread to the face and neck and within a few hours to the body and limbs. This rash begins to fade after about 24 hours, leaving a mottled appearance to the skin, which frequently peels.

Napkin Rash. A rash on the buttocks where the napkin is put on. It takes on the exact shape of the napkin and is due to the free ammonia gas in the urine, which is also strongly acid. It is actually a symptom of " acidosis." In order to avoid the rash the urine must be made alkaline. This can be done by giving Dinneford's Pure Fluid Magnesia and Lucozade in diluted form. In the case of a breast-fed baby these should be given between feeds.

Scarlet Fever. Bright scarlet, innumerable dots on a flushed background of the skin. It first appears on the neck and front of chest and passes downwards over trunk, arms and legs. The face is flushed, but there may be a white area round the mouth and this combined with the brightness of the eyes, gives a child a very different expression from one suffering from measles. Within a few hours the rash begins to fade. Scaling or peeling begins about the end of the first week.

Prickly Heat. Numerous tiny red spots or minute blisters. A common affection in infants during hot weather.

German Measles. This rash varies very much. Sometimes it may resemble measles, sometimes it is like scarlet fever. It is pale red or bright red in colour and it may be blotchy, but more usually it consists of small rosy dots which tend to enlarge and run together. There is no staining of the skin as in measles, nor is there any peeling, as in scarlet fever.

Chicken-pox. Spots appear on the first day of the illness and may continue to come out in crops for several successive days. This rash is sometimes the *only* sign of the disease present. The spot is oval-shaped, which rapidly becomes raised and filled with a clear fluid, forming a blister. The blister breaks and a crust is formed. This rash is only in the top layers of the skin, and no permanent marks are left—except in rare cases. The spots come out chiefly over the trunk, head and face. There may be none on the arms and legs. Smallpox, of course, is another matter, although these spots do at first somewhat resemble those of chicken-pox. For this reason chicken-pox has often been mistaken for smallpox. The spots should NOT be scratched.

Nettle Rash. This is generally due to food which hasn't suited the child and these eruptions of white and red patches or wheals are extremely irritating. Give a few doses of Dinneford's Pure Fluid Magnesia. This will settle his stomach and cool his blood.

REMEDIES, List of—see *Nursery Remedies.*

RHEUMATISM

This is more common in babies and children than some of us think. Above all beware of *Growing Pains*, which are referred to elsewhere in this book. It is said that half the deaths from heart disease are due to rheumatism in childhood.

In children rheumatism comes stealthily and treacherously, beginning with vague, wandering pains, more acute in damp weather. Never for a moment ignore lightly a child's muscular aches and pains. If you are in doubt whether to get a doctor to see a child, GET HIM ! You will help to make rheumatism impossible if you see that your growing child gets wholemeal bread, fruit and vegetables and dairy products, including milk, every day. Let children spend as much time as possible in the open air, in the sunshine. See that they wear light, warm clothing. Cold in itself is not bad for rheumatism. Cold dry air is beneficial. A child should exercise its muscles—but should never be made to drag after a grown-up who is going too fast. Long uninterrupted sleep at nights is essential. Remember, too, that the commonest cause of chronic rheumatism is septic

infection of the gums and teeth. Examination of the teeth is therefore necessary periodically. Frequent nasal catarrhs or sore throats should be sufficient to make you seek expert medical advice without delay.

RICKETS

This will never develop in growing children if they receive sufficient calcium, phosphorous and vitamin D. Rickets is a disease of the bones. They remain soft and weak instead of growing hard and strong. A mother requires extra calcium and vitamin D before the birth of her child as well as while she is suckling her baby. Without it her health will suffer as well as baby's development. Your local Welfare Clinic doctor will tell you how to ensure the correct diet—but do not forget that lack of sunlight is a contributory cause of bone and muscle weakness in small children.

RINGWORM

Ringworm of the body consists of one or more reddish or fawn coloured patches, circular or oval in shape, with scaly, slightly raised edges. These patches spread outwards, healing up in the centre, and so may run into one another. You can cure this kind of ringworm readily. Wash with warm water and soap or turpentine, then paint thoroughly with iodine. Repeat this for three or four days. The underclothing worn during the attack should be disinfected.

Ringworm of the scalp is more difficult to cure. It attacks school children and rarely people over the age of 18. (Don't let your child use anyone else's hat, brush, comb or towel.) One or more round or oval patches develop on the scalp. The skin involved is slightly reddened. These patches spread from the centre outwards, as in body ringworm, but are much more difficult to cure because the cause of the trouble lies buried in the hair follicles. All methods of treating ringworm are uncertain and disappoint, except treatment with the X-rays. This affords a method of curing with certainty any case of scalp ringworm within a month to six weeks. Consult a doctor as soon as you find a ringworm and have this treatment carried out. You will save time, trouble, expense and avoid grievous disappointment.

SCARLET FEVER—see *Infectious Illnesses and Rashes.*

SKIN ERUPTIONS

Few of us realise how sensitive a baby's skin is, how easily it may become inflamed, even by gently rubbing with a towel. Spots and eruptions arise very readily. A rash at teething-time, for instance, is a warning to mother to go slowly, for nature is trying to throw off some poisons. In babies, just as in adults, the skin is an organ of elimination and dry perspiration, or sour perspiration, can be the cause of inflammation. In the creases of baby's neck, and behind his ears, moisture dribbled from his mouth will cause occasional soreness. Lanoline on these parts night and morning will prevent this. If the wind is rather sharp a little olive oil put on before going out will usually prevent a cold rash. Then there is the well-known sweat-rash which is caused by over-clothing : tiny water-filled pimples. A head rash may be the result of using the wrong soap on baby's scalp. The smallest possible quantity of soap should be used, even with the best and purest. The rash known as Red Gum is generally a sign of acidity and indigestion. These small hard bright red spots are very irritating and may cover wide areas. Dinneford's Magnesia—a teasponful or so with each feed—will help to clear away the cause of the trouble.

SLEEP

To show you how important it is for baby to have as much sleep as possible, we give here the hours of sleep a day needed at different periods of life :—

New born infants need	18–20 hours
Growing children need	12–14 ,,
Adults need	7– 9 ,,
Old persons need	5– 7 ,,

Children have two periods of deepest sleep. One of these is during the first or second hours. The other period is between the eighth or ninth hours. Daytime sleep is always, or nearly always, lighter than night sleep. Sleep is so important that it is a mistake to associate bed with unhappy things—such as being sent to bed as a punishment. Growing children under five need 14 hours complete oblivion each day and their time-table should be very regular if the sleep is to be natural. It is still true that a bedtime story is one of the very best means of getting a child happily to sleep.

SORE THROAT

This may, or may not, indicate diphtheria. But the element of doubt should drive you to consult a doctor without delay. He will quickly put your mind at rest, or if there IS infection, tell you what to do.

SPRAINS

A child's ankle is most easily liable to be overstrained, but, of course, almost any structure of the body may suffer. The condition resulting from over-straining or twisting is called a sprain. Rest is necessary. If the sprain is severe apply cold at once : a bandage soaked in methylated spirit and cold water. The limb should not be used again until it is quite fit.

SQUINT

If there are any signs of squinting after baby is one year old take him to a reliable oculist. Taken early, squinting can usually be cured by blocking the weak eye, by the use of glasses or by a simple operation. During the baby's first year or so squinting may be due to nothing more than indigestion.

STOMACH ACHE—see *Indigestion and Colic.*

ST. VITUS' DANCE

The majority of cases of St. Vitus' Dance last from six to twelve weeks. Children between five and fifteen are most liable to the disease. The most prominent symptom is the involuntary movements of nearly all the muscles of the body, whether the child is sitting, standing or lying down. The treatment, right from the start, is BED—mental and physical rest. After some days, if the case is mild, the child may be allowed up for some part of each day. During convalescence the diet must be generous. He should have an open-air life without getting over-tired, and without the nervous excitement of games and of too many visitors. The care of a doctor is necessary.

SUMMER DIARRHŒA—see *Infantile Diarrhœa.*

SUNSTROKE

Mild sunstroke is not uncommon in children at the start of a holiday. They complain of sickness and loss of appetite, becoming irritable, sleeping badly, running a slight temperature. You should insist on your child wearing a light hat on sunny days if you have reason to fear the effects of the sun. See that he plays in the shade as much as possible. If you have a more severe case of sunstroke to deal with you must keep the sufferer in a cool darkened room, give plenty of cool drinks of water, better still Lucozade, and sponge repeatedly with cool or tepid water.

TEETHING

To make life easier for baby, and for mother too, during teething time, keep baby as far as possible to his regular hours. Visits, excitement, late nights, should be avoided. Stick to routine strictly and you will be saved many upsets and strain on the baby's constitution. There are 20 teeth concealed in baby's jaw—and they will come through at various periods between the 6th and 30th months—the front ones first, the back ones last. Usually the centre front ones on the lower jaw appear before the corresponding teeth in the upper jaw. If you wish your child to have good teeth onwards from baby's first tooth, take him to a dentist every six months after he is three years old. This will have the additional advantage of getting him accustomed to the dentist's chair at an early age.

TEMPERATURE

A temperature above 98.4 is always a danger signal. It may be caused by indigestion ; it may be accompanied by sickness, diarrhœa, pain, spots, sore throat. If you find you are anxious it is better to get a doctor. Before taking the temperature shake the mercury well down below normal, to 97 at least. Don't let the thermometer fly out of your hand in doing so. And don't break it against a chair or other object. A sharp flick downwards of the wrist and hand will do the trick. It is a good plan to do this over a bed or sofa. Then slip the thermometer in the groin between the child's legs. Hold it there about 7 minutes unless the thermometer is a 30-second one. When you withdraw it don't shake it down but take the reading at once. With an older child you can put it in his mouth ; the bulb slipping under the tip of his tongue. Here two or three minutes are sufficient.

THIRST

If baby cries fretfully it is better to try and find the reason rather than attempt to soothe him with a dummy. He may be thirsty. He is more likely to be thirsty than hungry—but you can quickly discover this by offering him a drink of cold boiled water.

THRUSH

On looking into the mouth of a baby or infant suffering from thrush you can see greyish white patches. They occur on the tongue, lips and inside the cheeks. Baby's mouth is tender and dry and he may refuse food on account of this, and be miserable and fretful. In order to avoid this

avoidable trouble a mother should see that everything that goes into baby's mouth is ABSOLUTELY CLEAN. Stale milk can cause it. Dirty feeding bottles. A dirty comforter. Immediately signs of thrush are noticed steps must be taken to eradicate it. Wash baby's mouth with weak peroxide of hydrogen mixed with equal parts of warm water once a day, after which it may be treated with cotton wool soaked in a solution made of a level teaspoonful of soda biborate, a tablespoonful of glycerine and five ounces of water. Burn cotton wool at once after using. Simply dab on—don't rub. Give a teaspoonful or so of Dinneford's with each feed to keep the stomach and bowels right.

TONGUE-TIE

This is a comparatively rare condition, but where it does occur it is very easily remedied by a doctor.

TONSILS AND TONSILITIS

The main function of tonsils is to destroy bacteria, and thus protect the system from infection. The tonsils are situated at the back of the mouth on either side of the throat. They are liable to become swollen or reddened and may make swallowing difficult. As there are rather dangerous complications possible when the tonsils give trouble it is wise to let a doctor see them, without loss of time. *Constant* trouble with the tonsils probably means that they would be better removed, providing the child is living under healthy conditions. Tonsils which have become diseased as the result of repeated attacks of tonsillitis are always better removed. The operation is a simple one. Unless this is done the trouble may spread to the ears.

ULCERS

Ulcers often cause trouble during teething, or if a child is suffering from over-feeding, under-feeding, wrong feeding, *dummy sucking*, or neglect. The treatment recommended for *Thrush* can be followed with safety ; but if the mouth or tonsils are badly inflamed, see a doctor.

VACCINATION

Vaccination must take place within the first six months of birth, unless a statement as to conscientious objection is made before a Commissioner of Oaths. The leg is a more suitable site than the arm, particularly for girls. The vaccination spot passes through three stages : a raised spot surrounded by a red area is formed after three days. This spot contains a clear fluid and forms a small blister by the 6th day. On the 10th day the fluid resembles pus and a small inflammatory swelling arises, the skin around being red and tender. A scab then begins to form as the place dries up. This usually comes off by the 21st day, leaving a permanent white scar. There may be a slight rise in temperature on the 3rd to 8th day. If the pustules do not form the arm is said not to have " taken " and the child should be revaccinated. An ordinary healthy child suffers very little from vaccination, although from the 5th to the 9th day after it is done a baby may be irritable. Vaccination ought to take place about every seven years.

VOMITING

This is generally a sign of over-feeding. But sometimes indigestion, or nervous excitement before meals, is to blame. In this case give Lucozade between meals. If the vomiting is really severe, or persistent, or if the milk is ejected with unusual force, then send for a doctor. See *Biliousness*.

WEANING

Normal weaning means a change from the breast to solids and milk mixtures, starting at nine months old. Carefully arranged, the mother's milk will disappear of itself, thus relieving the mother of any discomfort. A tight binder and a dose or two of salts is usually all that is required before it is finally dispersed. But do not take salts until the weaning is nearly completed,except with a copious draught of water, because salts taken with little or no liquid, eliminate fluids from the body and breast milk may then become highly concentrated and upset baby. A mother should make the transition as easy as possible for her baby. But it is better to wean baby from breast to cup rather than from breast to bottle. To teach baby to take food from a cup is in your best interests and baby's too. It is a good idea, too, at least a month before weaning, to teach baby to enjoy a rusk or hard baked crust. Let him bite away at it ten minutes before each meal. To accustom baby to a spoon and cup it is advisable to give water, orange juice, or anything else which is needed in addition to the breast feed, in this way right from birth.

WEIGHT

At birth babies normally weigh between 6 and 8 lb. But many weigh more than this, and plenty weigh less. Usually a baby loses a few ounces during the first few days, but generally regains its birth weight before the end of the second week. After that you can expect a gain of 4 to 6 ounces a week. Less than that is hardly enough. Over 8 ounces is too much. The following table shows that at 6 months the baby has about doubled his birth weight. At one year old baby should weigh between 20 and 21 lb. During the second year he will put on between 6 and 8 lb., during the third year 5 lb., during the fourth year round about 4 lb. Remember that weight is not so important as general development, tone and activity.

This table serves as a guide to weight increase :—

	lb.	oz.	
After 1 week	0	0	
„ 2 weeks	0	4	(up to)
„ 3 „	0	10	
„ 4 „	1	0	(just under)
„ 2 months	2	12	
„ 3 „	4	8	
„ 4 „	6	0	
„ 5 „	7	4	

	lb.	oz.
After 6 months	8	4
„ 7 „	9	0
„ 8 „	9	8
„ 9 „	10	4
„ 10 „	11	4
„ 11 „	12	4
„ 12 „	13	4
„ 15 „	16	8
„ 18 „	18	4
„ 21 „	19	8
„ 24 „	20	12
„ 36 „	25	0

WHOOPING COUGH

It is a week or ten days after the beginning of whooping cough that the familiar whoop is heard. Yet the contagiousness is at its height during the incubation and very early stages. This accounts for the rapidity with which infection spreads right through a road or village. So, if a little dry cough is heard rather persistently and the child suffers from catarrh, mother should isolate her child immediately and take every precaution to see that he does not spread the germs among other children. The worst danger of infection is over within a month. The whoop which is so instantly recognised by everyone is due to the difficulty in breathing caused by the paroxysm of coughing. In treating whooping cough it is important to KEEP UP THE STRENGTH. This can be achieved by giving Lucozade. Nurse the child rather more than usual. Avoid chilling. A cup of warm milk given when coughing disturbs sleep will frequently send the child peacefully off again. If his temperature becomes normal again after a few days, and the weather is sunny, take the child out. The more fresh air—the better, so that the lungs receive plentiful supplies of oxygen and general health is helped. Remember that in the case of a small child or baby it is often necessary to feed at shorter intervals, allowing the child to make good any loss by sickness after coughing bouts. BEWARE of broncho-pneumonia during convalescence. Rub the chest with warm camphorated oil. But do NOT apply poultices.

WIND

If baby uses the nipple as a dummy, not getting milk, then it is likely that he will be imbibing wind. And that means colic pains or at least great discomfort in the small stomach. The tummy will be full of wind and there is no room for food. A certain amount of wind is natural in the stomach—but for a successful feed it should be dispersed beforehand, either by laying baby downwards on your lap or holding him over your left shoulder, rubbing his back lightly upwards. Repeat this half-way through feed and again at the end. Remember that a teaspoonful of Dinneford's will always bring up painful wind and make baby comfortable. Never use a dummy.

WORMS

Parasites find their way into the body either through eating foods not carefully washed or prepared, through drinking impure water, or through infection from another. There are four varieties : the common tape worm, the long round worm, the short thread worm, and the long thread worm. The short thread worm is by far the most common. The wise mother will examine the motions of her child throughout childhood—daily so long as there are signs of ill-health. If a child is suffering he will be irritable, fretful and nervy. His face will seem to go thin, especially round the nose. There may be blue lines under his eyes ; sleep may be restless ; there will be a tendency to scratching, and pain in the lower abdomen. To get rid of this unhappy condition TREAT IT SERIOUSLY. Don't rely on pills, and purges, but put the child to bed. He should then be given a saline injection (a teaspoonful of salt to a pint of water—at blood heat). Every scrap of solid food should be withheld for a few days until the motions are quite odourless. For the first 24 hours fruit juices only should be given ; then the fruit itself, pineapple being particularly good. Also vegetable juices from well cleansed vegetables, sliced and covered with water, raw carrot juice, onion juice and garlic being especially good. Cooked vegetable juices are also purifying to the system. Food should be reintroduced gradually, giving an all-fruit breakfast ; lunch without water, gravies or soups but with a mixed salad ; crisp bread for tea with black treacle and a glass of milk. *Avoid* soft starch, such as porridge, milk puddings, potatoes, bananas, bread and butter. The child should have a daily bath. Naturally the treatment described above does not apply to very young babies.

9506